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**230 Chestnut Street
Meadville, PA 16335-3481**

Northwest Regional Office

814-332-6942
Fax: 814-332-6121

Mr. Charles B. Vogus
Vice President Operations
Penreco
138 Petrolia Street
Karns City, PA 16041

Re: Industrial Waste
Penreco
NPDES Permit No. PA0002135
APS ID No. 343382
Authorization ID No. 351686
Karns City Borough, Butler County

Dear Mr. Vogus:

Your permit is enclosed. Read the permit and the special conditions carefully.

In response to your comments received during the draft comment period a number of changes were made to the NPDES permit. Please refer to the attached "Comment and Response Document."

A Discharge Monitoring Report (DMR) and Supplemental Reporting Forms are included. The master DMR will be prepared and distributed by the U.S. Environmental Protection Agency (EPA) in the near future. Use the enclosed DMR Form until you receive a master from EPA. The reporting forms must be submitted to the Department and the EPA Regional Office as instructed in the permit and the enclosed Instruction Sheet.

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa. C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, PO Box 8457, Harrisburg, PA 17105-8457, 717-787-3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800-654-5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board at 717-787-3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

Mr. Charles B. Vogus

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IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717-787-3483) FOR MORE INFORMATION.

If you have any questions, please call Donald J. Luttman at 814-332-6942.

Sincerely,

/s/

Ricardo F. Gilson
Regional Manager
Water Management

Enclosures

cc: U.S. Environmental Protection Agency
Wastewater Management
Monitoring & Compliance Section
File

RFG:DJL:lsl:jb

**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
WATER MANAGEMENT PROGRAM**

**AUTHORIZATION TO DISCHARGE UNDER THE
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM**

NPDES PERMIT NO. PA0002135

In compliance with the provisions of the Clean Water Act, 33 U.S.C. Section 1251 et seq. (the "Act") and Pennsylvania's Clean Streams Law, as amended, 35 P.S. Section 691.1 et seq.,

Penreco

is authorized to discharge from a facility located at 138 Petrolia Street, Karns City, PA 16041

Municipality: **Karns City Borough**
County: **Butler**

to receiving waters named **South Branch Bear Creek (Outfalls 001, 002, 005, 006, 007, 008, 009, 010, 014, 020, 022, 023, 031, 033 and 034) and an unnamed tributary to South Branch Bear Creek (Outfalls 004, 011, 012, 013 and 032).**

in accordance with effluent limitations, monitoring requirements and other conditions set forth in Parts A, B, and C hereof.

THIS PERMIT SHALL EXPIRE AT MIDNIGHT, 10/29/08

The authority granted by this permit is subject to the following further qualifications:

1. If there is a conflict between the application, its supporting documents and/or amendments and the terms and conditions of this permit, the terms and conditions shall apply.
2. Failure to comply with the terms, conditions, or effluent limitations of this permit is grounds for enforcement action; for permit termination, revocation and reissuance, or modification; or for denial of a permit renewal application.
3. Complete application for renewal of this permit, or notification of intent to cease discharging by the expiration date, must be submitted to the Department at least 180 days prior to the above expiration date (unless permission has been granted by the Department for submission at a later date), using the appropriate NPDES permit application form.

In the event that a timely and complete application for renewal has been submitted and the Department is unable, through no fault of the permittee, to reissue the permit before the above expiration date, the terms and conditions of this permit, including submission of the Discharge Monitoring Reports, will be automatically continued and will remain fully effective and enforceable pending the grant or denial of the application for permit renewal.

4. This NPDES permit does not constitute authorization to construct or make modifications to wastewater treatment facilities necessary to meet the terms and conditions of this permit.

DATE PERMIT ISSUED 10/30/03

ISSUED BY /s/

DATE PERMIT AMENDMENT ISSUED _____

TITLE: Ricardo F. Gilson

DATE EFFECTIVE 11/1/03

Regional Manager -

Water Management

Northwest Regional Office

Comment and Response Document

Penreco
NPDES Permit No. PA0002135
APS ID No. 343382
Authorization ID No. 351686
Karns City Borough, Butler County

This document provides details regarding comments received from Penreco during and after the 30-day public comment period. As a result of comments received from Crompton Corporation in reference to their draft permit, the drainage area at Outfall 001 was re-measured and determined to be 7 square miles. Also, it was determined the appropriate flow rate to model Outfall 001 is 0.276 MGD. The flow contribution from storm water was not included in the discharge analysis flow rate. In response to your comments dated March 5, 2003 to the draft permit issued January 22, 2003:

1. The stream sampling data from the Old Fire House location presented in the March 1988 Toxic Reduction Evaluation (TRE) Study was used for background in the Pentoxsd model. Also the NH₃-N and CBOD₅ data were used for background in the WQAM6.3 model. The ambient temperature data presented in August 1997 Temperature Study was used in the temperature model.

The Q_{7,10} and R_q values reported in the temperature study were not used because they were calculated based on the regression equations in Water Resources Bulletin No. 15. The drainage area and slope of Toms Run were used in the regression equation to calculate a Q_{7,10} of 0.703 cfs. The cfs/m yield rate would be $0.703 \text{ cfs}/12.6 \text{ mi}^2 = 0.056$. This is slightly larger than the yield rate calculated using the actual data from the gage on Toms Run (0.0444).

It is more accurate to use the actual data from the gage on Toms Run than to use the regression equations to calculate the Q_{7,10}. This is true for the monthly Q_{7,10}s as well. Therefore, the actual data from Toms Run was used to calculate the Q_{7,10} flow and R_q values and not the values calculated from the regression equations.

The flow augmentation information presented in the Temperature Study was used to modify the temperature model.

2. Temperature Worksheet

The increased drainage area and decreased discharge flow rate were utilized in the temperature worksheet. With the addition of 0.0498 MGD for flow augmentation from other sources, the design stream flows for all periods are greater than the discharge flow rate. Therefore, the temperature worksheet accurately reflects the fact that the amount of water withdrawn from South Branch Bear Creek does not exceed the Q_{7,10} stream flows utilized in the model.

3. Metals

As indicted above the TRE data was used for background in the Pentoxsd model.

4. Site-specific data

- A. Site-specific stream temperatures were used in the temperature model.
- B. As indicated above Q7,10 and Rq values reported in the TRE were not used.

5. Temperature Measurement Frequency

Page 19 of the *Implementation Guidance for Temperature Criteria* indicates, “The frequency of self-monitoring must be adequate to support the determination of daily average concentrations. For large discharges with highly variable effluent quality, such as power generating facilities, daily, hourly, or even continuous monitoring may be required, with daily calculation of BTU/day for Case 1 situations”.

Therefore, daily sampling will be retained.

6. i. and ii were responded to above.

iii. Outfall 001 Metals

- A. It was indicated the hardness sample of 193 mg/l was not appropriate since it was collected in February and DEP Technical Guidance Document No. 391-2000-021 indicates the hardness should be collected during months July through November. Therefore, a hardness value of 181 mg/l was used. This is the average of two samples collected on July 6, 1998.

A discharge hardness of 252 mg/ was used in the Pentoxsd model.

- B. It was requested the limitations for metals be included as “mass-based” only.

Table 5-2: Method of Expressing Effluent Limits for IW Discharges, indicates average monthly, maximum daily, and instantaneous maximum concentrations are to be specified for technology based concentration limits and water quality-based limits. Therefore, the concentration limitations were retained.

- iv. The oil and grease limitation at outfall 005, which is an overflow from a raw water reservoir, was removed from the permit.

- v. Oil and grease limitations were removed from storm water outfalls 006, 007, 008, 010, 031, and 033 since these are non-process areas.
- vi. The monitoring frequency was reduced from 4/year to 2/year for TSS, Iron, Aluminum, and Flow at the storm water outfalls.

The following changes were made to the permit as a result of the September 5, 2003 comments received in reference to the “proposed final” permit sent to Alan Dodd on August 14, 2003.

1. Allowable Heat Load Limits

The allowable heat load limits were revised at Outfall 001 as a result of using a revised flow augmentation factor in the temperature model.

2. Concentration and Mass Loading of Pollutants at Outfall 001

The mass limitations for TSS and Oil and Grease were replaced with a requirement to monitor and report since these limitations are technology based concentration limits.

3. Stormwater Outfalls Oil and Grease Limit

The oil and grease limitation was removed at outfalls 009, 011, 012, 013, 014, 031, 032, and 034 since these storm water outfalls serve non-process areas.

4. Outfall 001 Copper

The daily maximum limitation was revised to 2.5 times the average monthly limitations.

5. Permit/DMR Forms Discrepancies

A monthly average limitation of 15 mg/l for oil and grease was included and the monitoring frequencies for aluminum and manganese were corrected on the DMR form for outfall 023.

6. A special condition has been added to Part C of the permit that requires verification of the monthly average flow augmentation value that was used in the temperature model.

The background concentrations for Copper and Lead were corrected in Pentoxsd modelling. Also, the stream hardness was properly input in the background hardness field instead of the instream hardness field. These changes resulted in slightly relaxed limits for Copper and Lead.

Finally, the “effective disinfection” special condition was included in the permit. This special condition is in your existing NPDES permit.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES**PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS**

1. For Outfall **001** Latitude 40° 59' 59" Longitude 79° 43' 20" River Mile Index 4.51 Stream Code 49141
which receives wastewater from hydrotreating of refined kerosene, oils and waxes; fractionation Bender Units; water washing; steam production; storage tank heating; cooling; laboratory; landfill operation; and sanitary and shower facilities.
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (mg/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						continuous	recorded	
5 day CBOD									
(05/01 - 10/31)	37	74		16	32	40	weekly	24-hr comp	
(11/01 - 04/30)	74	148		32	64	80	weekly	24-hr comp	
TSS	XX	XX		45	135	135	weekly	24-hr comp	
Oil and Grease	XX			15		30	weekly	3 grabs/24 hr	
Ammonia - Nitrogen									
(05/01 - 10/31)	3	6		1.3	2.6	3.25	weekly	24-hr comp	
(11/01 - 04/30)	9	18		3.9	7.8	9.75	weekly	24-hr comp	
Dissolved Oxygen			greater than 5.0 mg/l at all times				daily	grab	
Aluminum	1.43	2.86		0.62	1.24	1.55	weekly	24-hr comp	
Iron	XX	XX		2	4	5	weekly	24-hr comp	
Manganese	XX	XX		1	2	2.5	weekly	24-hr comp	
Copper	0.058	0.12		0.025	0.063	0.063	weekly	24-hr comp	
Lead	0.03	0.06		0.013	0.026	0.033	weekly	24-hr comp	
Zinc	XX	XX		0.058	0.15	0.15	weekly	24-hr comp	
(*) Temperature	<u>Daily Average</u>						daily	immersion	
January 1 - 31	63	MBTU/day						stabilization	
February 1 - 29	38	MBTU/day							
March 1 - 31	77	MBTU/day							
April 1 - 15	115	MBTU/day							

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall 001 (continued)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			Minimum	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Temperature (continued)	Daily Average						daily	immersion	
April 16 - 30	207	MTBU/day						stabilization	
May 1 - 15	131	MTBU/day							
May 16 - 31	196	MTBU/day							
June 1 - 15	102	MTBU/day							
June 16 - 30	66	MTBU/day							
July 1 - 31	42	MTBU/day							
August 1 - 31	37	MTBU/day							
September 1 - 15	49	MTBU/day							
September 16 - 30	30	MTBU/day							
October 1 - 15	77	MTBU/day							
October 16 - 31	58	MTBU/day							
November 1 - 15	81	MTBU/day							
November 16 - 30	77	MTBU/day							
December 1 - 31	66	MTBU/day							
Fecal Coliform				200/100ml			annual	grab	
Phenol	XX	XX		0.012	0.021		quarterly	grab	
pH			Within limits of 6.0 to 9.0 standard units at all times				daily	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 3 and 5 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 001 at the discharge from the treatment facilities and prior discharge to South Branch Bear Creek and mixing with any other waters.

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **002** Latitude 40° 59' 55" Longitude 79° 43' 23" River Mile Index 4.65 Stream Code 49141
 which receives wastewater from storm water runoff, groundwater, steam traps, and petroleum tankage draws.

- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	measured	
TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				15		30	1/year	grab	
Aluminum				XX			2/year	grab	
Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 002 - The API diversion
structure overflow to South Branch Bear Creek

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **004** Latitude 41° 00' 01" Longitude 79° 43' 57" River Mile Index 4.72 Stream Code 49158 which receives wastewater from coal pile storage storm water runoff and deep mine drainage.
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/month	measured	
TSS				30		50	2/month	grab	
Oil and Grease				15		30	2/month	grab	
Total Iron				1.4	2.8	3.5	2/month	grab	
Manganese				1.0	2.0	2.5	2/month	grab	
pH			6.0			9.0	2/month	grab	

XX - Monitor and report on monthly DMRs.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 004 - over flow from final
pond.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **005** Latitude 40° 59' 43" Longitude 79° 43' 39" River Mile Index 4.96 Stream Code 49141
which receives wastewater from raw water reservoir (untreated well and South Branch Bear Creek Surface Water).
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/month	estimate	
5 Day CBOD				XX			2/year	grab	
TSS				XX			2/month	grab	
TOC				XX			2/year	grab	
Ammonia as Nitrogen				XX			2/year	grab	
Nitrate-Nitrite Nitrogen				XX			2/year	grab	
Aluminum				XX			2/month	grab	
Iron				XX			2/month	grab	
Manganese				XX			2/year	grab	
Copper				XX			2/year	grab	
Zinc				XX			2/year	grab	
pH				XX			2/year	grab	

XX - Monitor and report on monthly DMRs.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 005 (over flow from raw water supply pond and prior to discharge to South Branch Bear Creek).

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES**PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS**

1. For Outfall **006** Latitude 41° 00' 20" Longitude 79° 43' 15" Stream Code 49141 River Mile Index _____
which receives wastewater from storm water

- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (mg/l)			Minimum	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.

(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 006.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **007** Latitude 41° 00' 5" Longitude 79° 43' 15" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 007.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **008** Latitude 40° 59' 43" Longitude 79° 43' 38" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 008.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **009** Latitude 40° 59' 52" Longitude 79° 43' 30" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 009.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **010** Latitude 40° 59' 45" Longitude 79° 43' 37" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 010.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES**PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS**

1. For Outfall **011** Latitude 40° 59' 51" Longitude 79° 43' 49" Stream Code 49158 River Mile Index _____
which receives wastewater from storm water

- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.

(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 011.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **012** Latitude 40° 59' 38" Longitude 79° 43' 40" Stream Code 49156 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 012.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **013** Latitude 40° 59' 38" Longitude 79° 43' 40" Stream Code 49156 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 013.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **014** Latitude 40° 59' 54" Longitude 79° 43' 23" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 014.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **031** Latitude 40° 59' 41" Longitude 79° 43' 46" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 031.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **032** Latitude 40° 59' 58" Longitude 79° 43' 50" Stream Code 49158 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (mg/l)			Minimum	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 032.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **033** Latitude 40° 59' 57" Longitude 79° 43' 19" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 033.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **034** Latitude 40° 59' 57" Longitude 79° 43' 19" Stream Code 49141 River Mile Index _____ which receives wastewater from storm water
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u>	24 Hr. Report	
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²	Measurement Frequency	Sample Type	Under Part A.3.c.(4)
Flow (MGD)	XX						2/year	estimate	
(*) TSS				XX			2/year	grab	
TOC				XX			1/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				XX			1/year	grab	
(*) Aluminum				XX			2/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			1/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

XX - Monitor and report on monthly DMRs.
(*) – See Special Conditions 2 and 6 in Part C of the permit.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 034.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **020** Latitude 40° 59' 40" Longitude 79° 43' 39" Stream Code 49141 River Mile Index _____ which receives wastewater from emergency overflows from water supply reservoirs and fire ponds.
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (mg/l)			<u>Minimum</u> Measurement Frequency	Sample Type	24 Hr. Report Under Part A.3.c.(4)
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²			
Flow (MGD)	XX						2/year	estimate	
TSS				XX			2/year	grab	
TOC				XX			2/year	grab	
Ammonia as Nitrogen				XX			2/year	grab	
Nitrate-Nitrite Nitrogen				XX			2/year	grab	
Oil and Grease				XX			2/year	grab	
Aluminum				XX			2/year	grab	
Iron				XX			2/year	grab	
Manganese				XX			2/year	grab	
Copper				XX			2/year	grab	
Zinc				XX			2/year	grab	
pH				XX			2/year	grab	

XX - Monitor and report on monthly DMRs.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 020 (prior to discharge South
Branch Bear Creek).

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

1. For Outfall **022** Latitude 40° 59' 40" Longitude 79° 43' 39" Stream Code 49141 River Mile Index _____ which receives wastewater from emergency overflows from water supply reservoirs and fire ponds.
- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (m g/l)			<u>Minimum</u> Measurement Frequency	Sample Type	24 Hr. Report Under Part A.3.c.(4)
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²			
Flow (MGD)	XX						2/year	estimate	
TSS				XX			2/year	grab	
TOC				XX			2/year	grab	
Ammonia as Nitrogen				XX			2/year	grab	
Nitrate-Nitrite Nitrogen				XX			2/year	grab	
Oil and Grease				XX			2/year	grab	
Aluminum				XX			2/year	grab	
Iron				XX			2/year	grab	
Manganese				XX			2/year	grab	
Copper				XX			2/year	grab	
Zinc				XX			2/year	grab	
pH				XX			2/year	grab	

XX - Monitor and report on monthly DMRs.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 022 (prior to discharge South
Branch Bear Creek).

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES**PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS**

1. For Outfall **023** Latitude 40° 59' 50" Longitude 79° 43' 20" River Mile Index _____ Stream Code 49141
which receives wastewater from storm water runoff from kerosene storage diked area.

- a. The permittee is authorized to discharge during the period from issuance date to expiration date
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (Also see additional requirements, Footnotes and Supplemental Information on page 3)

Discharge Parameter	EFFLUENT LIMITATIONS						MONITORING REQUIREMENTS		
	Mass Units (lbs/day) ¹			Concentrations (mg/l)			Minimum Measurement Frequency	Sample Type	24 Hr. Report Under Part A.3.c.(4)
	Average Monthly	Maximum Daily	Minimum	Average Monthly	Maximum Daily	Instantaneous Maximum ²			
Flow (MGD)	XX						2year	estimate	
5 Day CBOD				XX			1/year	grab	
(*) TSS				XX			2/year	grab	
Ammonia as Nitrogen				XX			1/year	grab	
Nitrate-Nitrite Nitrogen				XX			1/year	grab	
Oil and Grease				15		30	1/year	grab	
(*) Aluminum				XX			1/year	grab	
(*) Iron				XX			2/year	grab	
Manganese				XX			2/year	grab	
Copper				XX			1/year	grab	
Zinc				XX			1/year	grab	
pH				XX			1/year	grab	

(*) – See Special Condition 2 and 6 in Part C of the permit

XX - Monitor and report on monthly DMRs.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): storm water Outfall 023 (prior to
discharge to South Branch Bear Creek and mixing with any other waters).

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATERS FACILITIES

PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

Additional Requirements

- c. All discharges of floating materials, oil, grease, scum and substances which produce color, tastes, odors, turbidity or settle to form deposits shall be controlled to levels which will not be inimical or harmful to the water uses to be protected or to human, animal, plant or aquatic life (93.6)(b).

Footnotes (Refer to Page 2 - 2v)

- (1) When sampling to determine compliance with mass effluent limitations, the discharge flow at the time of sampling must be measured, recorded and reported on the Discharge Monitoring Report Form.
- (2) The Instantaneous Maximum Discharge Limitations are for compliance use by the Department only. Do not report instantaneous maximums on Discharge Monitoring Reports (DMRs) or supplemental DMRs unless specifically required on those forms to do so.

Supplemental Information

- (1) If a flow limitation is included on Page 2 - 2t, it is based upon the rated hydraulic design capacity of the treatment facility and will be used to determine whether a hydraulic overload exists.
- (2) The effluent limitations for this outfall were determined using an effluent discharge of 0.276 million gallons per day for Outfall 001, varies million gallons per day for Outfall 002, varies million gallons per day for Outfall 004, varies million gallons per day for Outfall 005, varies million gallons per day for Outfall 006, varies million gallons per day for Outfall 007, varies million gallons per day for Outfall 008, varies million gallons per day for Outfall 009, varies million gallons per day for Outfall 010, varies million gallons per day for Outfall 011, varies million gallons per day for Outfall 012, varies million gallons per day for Outfall 013, varies million gallons per day for Outfall 014, varies million gallons per day for Outfall 031, varies million gallons per day for Outfall 032, varies million gallons per day for Outfall 033, varies million gallons per day for Outfall 034, varies million gallons per day for Outfall 020, varies million gallons per day for Outfall 022, and varies million gallons per day for Outfall 023.

PART A**2. DEFINITIONS**

- a. “Bypass” means the intentional diversion of waste streams from any portion of a treatment facility.
- b. “Severe property damage” means substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.
- c. “Daily discharge” means the discharge of a pollutant measured during a calendar day or any 24-hour period that reasonably represents the calendar day for purposes of sampling. For pollutants with limitations expressed in units of mass, the “daily discharge” is calculated as the total mass of the pollutant discharged over the day. For pollutants with limitations expressed in other units of measurement, the “daily discharge” is calculated as the average measurement of the pollutant over the day.
- d. “Average” refers to the use of an arithmetic mean, unless otherwise specified in this permit.
- e. “Geometric Average (mean)” means the average of a set of n sample results given by the nth root of their product.
- f. “Average monthly” discharge limitation means the highest allowable average of “daily values” over a calendar month, calculated as the sum of all “daily values” measured during a calendar month divided by the number of “daily values” measured during that month.
- g. “Average weekly” discharge limitation means the highest allowable average of “daily values” over a calendar week, calculated as the sum of all “daily values” measured during a calendar week divided by the number of “daily values” measured during that week.
- h. “Maximum daily” discharge limitation means the highest allowable “daily discharge.”
- i. “Maximum any time” (or instantaneous maximum) means the level not to be exceeded at any time in any grab sample.
- j. “Composite Sample” (for all except GC/MS volatile organic analysis) means a combination of at least 8 individual samples of at least 100 milliliters each obtained at periodic intervals during the operating hours of a facility over a 24 hour period. The composite must be flow-proportional, either the volume of each individual sample is proportional to discharge flow rates, or the sampling interval (for constant volume samples) is proportional to the flow rates over the time period used to produce the composite.

“Composite Sample for GC/MS volatile organic analysis” consists of at least four (rather than eight) aliquots or grab samples collected during actual hours of discharge over a 24 hour period and need not be flow proportioned. The four samples are composited in the laboratory immediately before analysis, and only one analysis performed.

The maximum time period between individual samples used for any “composite sample” shall not exceed two hours, except that for wastes of a uniform nature the samples may be collected on a frequency of at least twice per working shift and shall be equally spaced over a 24-hour period (or over the operating day if flows are of a shorter duration).

- k. “Grab Sample” means an individual sample of at least 100 milliliters collected at a randomly-selected time over a period not to exceed 15 minutes.
- l. “i-s” means immersion stabilization - in which a calibrated device is immersed in the wastewater until the reading is stabilized.
- m. The “Daily Average” temperature means the average of all temperature measurements made, or the mean value plot of the record of a continuous automated temperature recording instrument, either during a calendar day or during the operating day if flows are of a shorter duration.
- n. “Measured Flow” means any method of liquid volume measurement, the accuracy of which has been previously demonstrated in engineering practice, or for which a relationship to absolute volume has been obtained.
- o. “At outfall XXX” means a sampling location in outfall line XXX below the last point at which wastes are added to outfall line XXX, or where otherwise specified.
- p. “Estimate” means to be based on a technical evaluation of the sources contributing to the discharge including, but not limited to, pump capabilities, water meters and batch discharge volumes.
- q. “Non-contact cooling water” means water used to reduce temperature which does not come in direct contact with any raw material, intermediate product, waste product (other than heat), or finished product.

Such water may on occasion, as a result of corrosion, cooling system leakage or similar cooling system failures contain small amounts of process chemicals: provided, that all reasonable measures have been taken to prevent, reduce, eliminate and control the maximum extent feasible such contamination: and provided further, that all reasonable measures have been taken that will mitigate the effects of such contamination once it has occurred.

- r. “Toxic Pollutant”- Those pollutants, or combinations of pollutants, including disease-causing agents, which after discharge and upon exposure, ingestion, inhalation, or assimilation into any organism, either directly from the environment or indirectly by ingestion through food chains, will, on the basis of information available to the Department, cause death, disease, behavioral abnormalities, cancer, genetic mutations, physiological malfunctions, including malfunctions in reproduction, or physical deformations in such organisms or their offspring.
- s. “Hazardous substance” means any substance designated under 40 CFR Part 116 pursuant to Section 311 of the Clean Water Act.

- t. “Publicly Owned Treatment Works” or “POTW” means a facility as defined by Section 212 of the Clean Water Act which is owned by a State or Municipality, as defined by Section 502(4) of the Clean Water Act, including any sewers that convey wastewater to such a treatment works, but not including pipes, sewers or other conveyances not connected to a facility providing treatment. The term also means the municipality as defined in Section 502(4) of the Clean Water Act which has jurisdiction over the indirect discharges to and the discharges from such a treatment works.
- u. “Industrial User” means an establishment which discharges or introduces industrial wastes into a Publicly Owned Treatment Works (POTW).
- v. “Total Dissolved Solids” means the total dissolved (filterable) solids as determined by use of the method specified in 40 CFR Part 136.
- w. “Storm water associated with industrial activity” means the discharge from any conveyance which is used for collecting and conveying storm water and which is directly related to manufacturing, processing, or raw materials storage areas as defined at 40 CFR Part 122.26(b)(14).
- x. “Storm water” means storm water runoff, snow melt runoff, and surface runoff and drainage.
- y. “Best Management Practices (“BMPs”)” means schedules of activities, prohibitions of practices, maintenance procedures, and other management practices to prevent or reduce the pollution of “Waters of the United States.” BMPs also include treatment requirements, operating procedures, and practices to control plant site runoff, spillage or leaks, sludge or waste disposal, or drainage from raw material storage.

3. SELF-MONITORING, REPORTING, AND RECORDS KEEPING

a. Representative Sampling

- (1) Samples and measurements taken for the purpose of monitoring shall be representative of the monitored activity.

(2) Records Retention

Except for records of monitoring information required by this permit related to the permittee’s sewage sludge use and disposal activities which shall be retained for a period of at least 5 years, all records of monitoring activities and results (including all original strip chart recordings for continuous monitoring instrumentation and calibration and maintenance records), copies of all reports required by this permit, and records of all data used to complete the application for this permit shall be retained by the permittee for three (3) years from the date of the sample measurement, report, or application. The three year period shall be extended as requested by the Department or the EPA Regional Administrator.

(3) Recording of Results

For each measurement or sample taken pursuant to the requirements of this permit, the permittee shall record the following information:

- (i) The exact place, date, and time of sampling or measurements;
- (ii) The person(s) who performed the sampling or measurements;
- (iii) The date(s) the analyses were performed;
- (iv) The person(s) who performed the analyses;
- (v) The analytical techniques or methods used; and the associated detection level; and
- (vi) The results of such analyses.

(4) Test Procedures

Unless otherwise specified in this permit, the test procedures for the analysis of pollutants shall be those contained in 40 CFR Part 136 (or in the case of sludge use or disposal, approved under 40 CFR Part 136 unless otherwise specified in 40 CFR Part 503), or alternate test procedures approved pursuant to those parts, unless other test procedures have been specified in the permit.

(5) Quality Assurance/Control

In an effort to assure accurate self-monitoring analyses results:

- (a) Permittee or its designated laboratory shall participate in the periodic scheduled quality assurance inspections conducted by the Department and EPA.
- (b) The permittee or its designated laboratory shall develop and implement a program to assure the quality and accurateness of the analyses performed to satisfy the requirements of this permit in accordance with 40 CFR Part 136, Appendix A

b. Reporting of Monitoring Results

- (1) The permittee shall effectively monitor the operation and efficiency of all wastewater treatment and control facilities, and the quantity and quality of the discharge(s) as specified in this permit.
- (2) Unless instructed otherwise in Part C of this permit, monitoring results obtained each month shall be summarized for that month and reported on a Discharge Monitoring Report (DMR).

- (3) The completed DMR Form shall be signed and certified either by the following applicable person (as defined in 40 CFR 122.22(a)) or by that person's duly authorized representative (as defined in 40 CFR 122.22(b)):

- * For a corporation - by a responsible corporate officer
- * For a Partnership or Sole Proprietorship - by a general partner or the proprietor, respectively
- * For a Municipality, State, Federal or other public agency - by a principle executive officer or ranking elected official.

If signed by other than the above, written notification of delegation of DMR signatory authority must be submitted to the Department.

- (4) If the permittee monitors any pollutant, using analytical methods described in A.3.a(4) above, more frequently than the permit requires, the results of this monitoring shall be incorporated, as appropriate, into the calculations used to report self-monitoring data on the DMR.

c. Reporting Requirements

- (1) Planned Changes - The permittee shall give notice to the Department as soon as possible of any planned physical alterations or additions to the permitted facility. Notice is required only when:
- (a) The alteration or addition to a permitted facility may meet one of the criteria for determining whether a facility is a new source in §122.29(b); or
 - (b) The alteration or addition could significantly change the nature or increase the quantity of pollutants discharged. This notification applies to pollutants which are subject neither to effluent limitations in the permit, nor to notification requirements under §122.42(a)(1).
 - (c) The alteration or addition results in a significant change in the permittee's sludge use or disposal practices, and such alteration, addition, or change may justify the application of permit conditions that are different from or absent in the existing permit, including notification of additional use or disposal sites not reported during the permit application process or not reported pursuant to an approved land application plan;

(2) Anticipated Non-Compliance

The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements.

(3) Compliance Schedules

Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule of this permit shall be submitted no later than 14 days following each schedule date.

(4) Twenty-Four Hour Reporting

- (a) The permittee shall report any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances. The written submission shall contain a description of the noncompliance and its cause; the period of noncompliance, including exact dates and times, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance.
- (b) The following shall be included as information which must be reported within 24 hours under this paragraph.
 - (i) Any unanticipated bypass which exceeds any effluent limitation in the permit.
 - (ii) Any catastrophic event which causes the discharge to exceed effluent limitations in this permit.
 - (iii) Violation of a maximum daily discharge limitation for any of the pollutants listed by the Department in the permit to be reported within 24 hours.
- (c) The Department may waive the written report on a case-by-case basis for reports under paragraph c (4)(a) of this section if the oral report has been received within 24 hours.

(5) Other Noncompliance

The permittee shall report all instances of noncompliance not reported under paragraphs c (3), (4) of this section, at the time monitoring reports are submitted. The reports shall contain the information listed in paragraph c (4) of this section.

Compliance with reporting requirements under A.3.c. above shall not excuse a person from immediate notification of incidents causing or threatening pollution pursuant to 25 PA Code 101.2.

- d. Specific Toxic Substance Notification Levels (for Manufacturing, Commercial, Mining, and Silvicultural Dischargers) The permittee shall notify the Department as soon as it knows or has reason to believe the following:
- (1) That any activity has occurred, or will occur, which would result in the discharge of any toxic pollutant which is not limited in the permit, if that discharge on a routine or frequent basis will exceed the highest of the following “notification levels.”
 - (a) One hundred micrograms per liter.
 - (b) Two hundred micrograms per liter for acrolein and acrylonitrile.
 - (c) Five hundred micrograms per liter for 2, 4-dinitrophenol and 2-methyl -4, 6-dinitrophenol.
 - (d) One milligram per liter for antimony.
 - (e) Five (5) times the maximum concentration value reported for that pollutant in the permit application.
 - (f) Any other notification level established by the Department.
 - (2) That any activity has occurred or will occur which would result in any discharge, on a non-routine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following “notification levels”:
 - (a) Five hundred micrograms per liter;
 - (b) One milligram per liter for antimony;
 - (c) Ten (10) times the maximum concentration value reported for that pollutant in the permit application;
 - (d) Any other notification level established by the Department.

PART B**1. MANAGEMENT REQUIREMENTS****a. Compliance Schedules**

- (1) The permittee shall achieve compliance with the terms and conditions of this permit within the time frames specified in Part C of this permit.
- (2) The permittee shall submit reports of compliance or noncompliance with, or progress reports as applicable, any interim and final requirements contained in this permit. Such reports shall be submitted no later than 14 days following the applicable schedule date or compliance deadline.

b. Permit Modification, Termination, or Revocation and Reissuance

- (1) This permit may be modified, suspended, or revoked in whole or in part during its term for cause, including, but not limited to, any of the causes specified in 25 Pa. Code, Chapter 92.
- (2) The filing of a request by the permittee for a permit modification, revocation and reissuance, or termination, or a notification of planned changes or anticipated non-compliance, does not stay any permit condition.
- (3) In the absence of a Departmental action to modify or revoke and reissue this permit, the permittee shall comply with effluent standards or prohibitions established under Section 307(a) of the Clean Water Act for toxic pollutants within the time specified in the regulations that establish those standards or prohibitions.

c. Duty to Provide Information

- (1) The permittee shall furnish to the Department, within a reasonable time, any information which the Department may request to determine whether cause exists for modifying, revoking and reissuing, or terminating this permit, or to determine compliance with this permit.
- (2) The permittee shall furnish to the Department, upon request, copies of records required to be kept by this permit.
- (3) Other Information - Where the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Department, it shall promptly submit such facts or information to the Department.

- (4) Where the permittee is a POTW, the permittee shall provide adequate notice to the Department of the following:
- (a) Any new introduction of pollutants into the POTW from an indirect discharger which would be subject to Sections 301 and 306 of the Clean Water Act if it were otherwise discharging those pollutants.
 - (b) Any substantial change in the volume or character of pollutants being introduced into the POTW by an Industrial User which was discharging into the POTW at the time of issuance of this permit.
 - (c) For the purpose of this paragraph, adequate notice shall include information on:
 - (i) any change in the quality and quantity of the effluent introduced into the POTW, and
 - (ii) any anticipated impact of the change on the quality or quantity of the effluent to be discharged from the POTW.

The submission of the above information in the POTW's Annual Wasteload Management Report, required under the provisions of 25 Pa. Code Chapter 94, will normally be considered as providing adequate notice to the Department, unless a more stringent time period is required by law, regulation, or permit condition in which case the more stringent submission date shall apply

- (d) The identity of Industrial Users served by the POTW which are subject to pretreatment standards adopted under Section 307(b) of the Clean Water Act; the POTW shall also specify the total volume of discharge and estimated concentration of each pollutant discharged into the POTW by the Industrial Users.
- (e) The POTW shall require all Industrial Users to comply with the reporting requirements of Sections 204(b), 307, and 308 of the Clean Water Act and any regulations adopted thereunder, and the Clean Streams Law and any regulations adopted thereunder.

d. Facilities Operation

The permittee shall at all times maintain in good working order and properly operate and maintain all facilities and systems which are installed or used by the permittee to achieve compliance with the terms and conditions of this permit. Proper operation and maintenance includes, but is not limited to, adequate laboratory controls including appropriate quality assurance procedures. This provision also includes the operation of backup or auxiliary facilities or similar systems which are installed by the permittee, only when necessary to achieve compliance with the terms and conditions of this permit.

The permittee shall develop, install, and maintain Best Management Practices to control or abate the discharge of pollutants when the practices are reasonably necessary to achieve the effluent limitations and standards in this permit or to carry out the purposes and intent of the Clean Water Act, or when required to do so by the Department.

e. Adverse Impact

The permittee shall take all reasonable steps to minimize or prevent any discharge or sludge use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment.

f. Bypassing

- (1) Bypassing Not Exceeding Permit Limitations - The permittee may allow a bypass to occur which does not cause effluent limitations to be violated, but only if the bypass is essential for maintenance to assure efficient operation. This type of bypassing is not subject to the reporting and notification requirements of Part A.3.c.
- (2) Other Bypassing - In all other situations bypassing is prohibited unless all of the following conditions are met:
 - (a) A bypass is unavoidable to prevent loss of life, personal injury or “severe property damage”;
 - (b) There are no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate backup equipment should have been installed (in the exercise of reasonable engineering judgment) to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance;
 - (c) The permittee submitted the necessary reports required under Part A.3.c.
- (3) The Department may approve an anticipated bypass, after considering its adverse effects, if the Department determines that it will meet the three conditions (a through c) listed above.

2. **PENALTIES AND LIABILITY**

a. Violations of Permit Conditions

Any person violating Sections 301, 302, 306, 307, 308, 318, or 405 of the Clean Water Act or any permit condition or limitation implementing such sections in a permit issued under Section 402 of the Act is subject to civil, administrative, and/or criminal penalties as set forth in 40 CFR 122.41(a)(2).

Any person or municipality who violates any provision of this permit, any rule, regulation, or order of the Department, or any condition or limitation of any permit issued pursuant to the Clean Streams Law is subject to criminal and/or civil penalties as set forth in Sections 602, 603 and 605 of the Clean Streams Law.

b. Falsifying Information

Any person who does any of the following:

Falsifies, tampers with, or knowingly renders inaccurate any monitoring device or method required to be maintained under this permit; or

Knowingly makes any false statement, representation, or certification in any record or other document submitted or required to be maintained under this permit (including monitoring reports or reports of compliance or non-compliance).

shall, upon conviction, be punished by a fine and/or imprisonment as set forth in 18 P.S. §4904 and 40 CFR 122.41(j)(5) and (k)(2).

c. Liability

Nothing in this permit shall be construed to relieve the permittee from civil or criminal penalties for noncompliance pursuant to Section 309 of the Clean Water Act or Sections 602, 603 or 605 of the Clean Streams Law.

Nothing in this permit shall be construed to preclude the institution of any legal action or to relieve the permittee from any responsibilities, liabilities, or penalties to which the permittee is or may be subject to under the Clean Water Act and the Clean Streams Law.

d. Enforcement Proceedings

- (1) It shall not be a defense for the permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit.

3. OTHER RESPONSIBILITIES

a. Right of Entry

Pursuant to Sections 5(b) and 305 of Pennsylvania's Clean Streams Law and 25 Pa. Code, Chapter 92, the permittee shall allow the head of the Department, the EPA Regional Administrator, and/or their authorized representatives, upon the presentation of credentials and other documents as may be required by law:

- (1) To enter upon the permittee's premises where a regulated facility or activity is located or conducted, or where records must be kept under the conditions of this permit;
- (2) To have access to and copy at reasonable times any records that must be kept under the conditions of this permit;
- (3) To inspect at reasonable times any facilities, equipment (including monitoring and control equipment), practices or operations regulated or required under this permit;
- (4) To sample or monitor at reasonable times, for the purposes of assuring permit compliance or as otherwise authorized by the Clean Water Act, any substances or parameters at any location.

b. Transfer of Permits

- (1) *Transfers by modification.* Except as provided in paragraph (2) of this section, a permit may be transferred by the permittee to a new owner or operator only if the permit has been modified or revoked and reissued, or a minor modification made to identify the new permittee and incorporate such other requirements as may be necessary under CWA.
- (2) *Automatic transfers.* As an alternative to transfers under paragraph (1) of this section, any NPDES permit may be automatically transferred to a new permittee if:
 - (a) The current permittee notifies the Department at least 30 days in advance of the proposed transfer date in paragraph (2)(b) of this section;
 - (b) The notice includes the appropriate Department transfer form signed by the existing and new permittees containing a specific date for transfer of permit responsibility, coverage, and liability between them; and
 - (c) The Department does not notify the existing permittee and the proposed new permittee of its intent to modify or revoke and reissue the permit. A modification under this subparagraph may also be a minor modification. If this notice is not received, the transfer is effective on the date specified in the agreement mentioned in paragraph (2)(b) of this section.

- (3) In the event the Department does not approve transfer of the permit, the new owner or controller must submit a new permit application.

c. Property Rights

The issuance of this permit does not convey any property rights of any sort, or any exclusive privilege.

d. Other Laws

The issuance of a permit does not authorize any injury to persons or property or invasion of other private rights, or any infringement of State or local law or regulations.

PART C

I. OTHER REQUIREMENTS

ONE: Properly completed and signed Discharge Monitoring Reports (DMRs), as described in Part A.3.b of this permit, shall be submitted, within 28 days after the end of each monthly reporting period, to the Department (and the EPA Regional Office, if noted below) at the following address:

PA Dept. of Environmental Protection	Office of Compliance & Enforcement (3WP30)
Northwest Regional Office	NPDES Branch
- Water Management	Water Protection Division
230 Chestnut Street	US EPA -- Region III
Meadville, PA 16335	1650 Arch Street
	Philadelphia, PA 19103-2029

II. SPECIAL CONDITIONS

1. Chemical Additives

Chemical additives to control corrosion, scaling, algae, slime, fouling, oxygen, etc., and blowdown discharge rates shall be managed by the permittee to ensure that toxic effects in the receiving stream are prevented. Usage rates shall be limited to the minimum amount necessary to accomplish the intended purposes of the chemical addition and approval is limited to the chemicals and usage rates contained in the application.

Whenever a change in chemical additive or increase in usage rates is desired by the permittee, a written notification in the format specified by the Department, shall be submitted at least sixty (60) days prior to the proposed use of the chemical. For each proposed chemical or usage rate, the written notification, as a minimum, shall include the following:

- A. Trade names of additive;
- B. Name and address of additive manufacturer;
- C. Material Safety Data Sheet (MSDS) or other available information on mammalian or aquatic toxicological effects;
- D. Bioassay data including the 96-hour LC_{50} on the whole product,
- E. Proposed average and maximum additive usage rates in pounds per day;
- F. A flow diagram showing the point of chemical addition and the affected outfalls;

PART C

II. SPECIAL CONDITIONS (continued)

- G. The expected concentration of the product at the final outfall;
- H. The product density for liquids (pounds per gallon) used to convert the usage rate (gallons per day) to in-system concentrations (Milligrams per Liter);
- I. The analytical test method that could be used to verify final discharge concentrations when the product is in use and the associated minimum analytical detection level in Milligrams per Liter;
- J. The conditioned water discharge rate or blowdown rate and duration in hours;
- K. Available data on the degradation of or decomposition of the additive in the aquatic environment; and
- L. Any other data or information the permittee believes would be helpful to the Department in completing its review.

Use of products or chemicals that contain one or more ingredients that are carcinogens is generally prohibited. Before proposing limited use of such products or chemicals, the permittee must first thoroughly investigate use of alternative products or chemicals to avoid the use of the carcinogens. If no suitable alternatives are available, the permittee must submit written documentation as part of the information required above, that demonstrates to the satisfaction of the Department that no suitable alternatives are available and any carcinogen in the proposed chemical or product will not be detectable in the final effluent using the most sensitive analytical method available.

Based on the information presented, the Department will determine within sixty (60) days whether the existing NPDES permit must be amended to include specific effluent limitations for active ingredients or other control measures. When so required, the permittee will be advised within sixty (60) days that a formal request for a permit amendment is required including a filing fee and Act 14 notices.

If a permit amendment application is not requested within sixty (60) days, the permittee may proceed with the use of the proposed chemical additive or usage rate.

PART C

II. SPECIAL CONDITIONS (continued)

Accurate records of usage (name of additive, quantity added, date added) of any approved chemical additive and blowdown discharge volumes must be maintained on the Chemical

Additive Reporting Form and kept on-site by the permittee. All correspondence and notifications related to the chemical additives and usage rates must also be kept on-site with the required daily chemical usage records. If the notification is incomplete or the Department notifies the permittee that the proposed usage rate will cause violations of water quality standards, then use of the requested chemical additive or requested change in its usage rate will be denied.

2. Storm Water Sampling Requirements

- A. All samples shall be collected from the discharge resulting from a storm event that is greater than 0.1 inches in magnitude and that occurs at least 72 hours from the previously measurable (greater than 0.1 inch rainfall) storm event.
- B. Grab samples shall be taken during the first 30 minutes of the discharge. If the collection of a grab sample during the first 30 minutes is impracticable, a grab sample can be taken during the first hour of the discharge and the discharger shall submit on the Department form entitled "Additional Information for the Reporting of Stormwater Discharge Monitoring," a description of why a grab sample during the first 30 minutes is impracticable.
- C. The permittee shall submit the additional information requested in the attached Department form entitled, "Additional Information for the Reporting of Stormwater Discharge Monitoring." This additional information shall be submitted along with the DMR form.
- D. When the discharger is unable to collect samples due to adverse climatic conditions, the discharger must submit in lieu of sampling data a description of why samples could not be collected, including available documentation of the event. Adverse climatic conditions which may prohibit the collection of samples include weather conditions that create dangerous conditions for personnel (such as local flooding, high winds, hurricane, tornadoes, electrical storms, etc.) or otherwise make the collection of a sample impracticable (drought, extended frozen conditions, etc.). This information shall be submitted on the attached form entitled "Additional Information for the Reporting of Storm Water Discharge Monitoring."

PART C

II. SPECIAL CONDITIONS (continued)

E. Pollution Reduction Report

For the pollutants listed at the outfalls below, the permittee shall survey the plant to identify the sources of the pollutants, implement measures to eliminate or reduce the pollutants, and submit a Pollutant Reduction Report to the Department within 3 years from PID. In the report the permittee shall: (a) identify the sources of the pollutants; (b) describe those measures that were tried after issuance of this permit and their effectiveness in eliminating or reducing the pollutants; and (c) describe and submit schedules for those measures that will be put into effect. Semi-annual status reports shall be submitted by January 31 and June 30 of each year of this 3-year period.

Outfall

Pollutants

006 - 014, 031 - 034, and 023

Aluminum and Total Iron

PID -- Permit Issuance Date

3. Temperature

This discharge shall not cause a change in the stream temperature of more than $\pm 2^{\circ}\text{F}$ during any one hour.

4. Solids Handling

All solid waste generated at the site must be disposed in a method approved by the Department of Environmental Protection Waste Management Program.

PART C

II. SPECIAL CONDITIONS (continued)

5. Measurement of final thermal effluent limitations.

For Outfall 001 in order to demonstrate compliance with thermal discharge limitations, the permittee shall monitor the following parameters:

<u>Parameter</u>	<u>Units</u>	<u>Monitoring Location</u>
Waste discharge, Qd	MGD	Outfall 001
Waste discharge temperature, Td	°F	Outfall 001
Plant intake water temperature, T1	°F	Sample Point 101

To demonstrate compliance, the permittee shall perform the following calculation:

$$Qd \times 8.34 (Td - T1) = \text{Actual Heat Discharge Rate, MBTU/day}$$

6. Storm Water Sampling Reduction

If all bi-annual sample results are less than the cut-off concentration for that parameter for the time period from one year after PID to two years after PID, then the sampling frequency shall be reduced to 1/year for the remainder of the permit for that parameter.

Cut-Off Concentration

TSS	100 mg/l
Aluminum	0.75 mg/l
Iron	1 mg/l

PID -- Permit Issuance Date

7. Flow Augmentation Verification

The total water consumption by the facility, the amount of water withdrawn from South Branch Bear Creek (SBBC), the amount of evaporative losses, and the discharge flow at Outfall 001 shall be calculated in order to verify the flow augmentation that was utilized in the temperature model. These flows should be calculated annually in the absence of storm water on a monthly average basis in order to calculate the amount of flow that is being utilized from sources other than SBBC. Alternatively, the sources of water other than SBBC can be measured directly. Some measurements may be approximate. This data is to be submitted with the NPDES renewal application.

PART C

II. SPECIAL CONDITIONS (continued)

8. Effective Disinfection

The permittee shall provide for effective disinfection of this discharge to control disease-producing organisms during the swimming season (May 1 through September 30) to achieve a fecal coliform concentration not greater than 200/100 ml as a geometric average (mean), and not greater than 1,000/100 ml in more than 10% of the samples tested.

PERMITTEE NAME ADDRESS (include
Facility Name / Location if different)

NAME: Penreco

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

FORM APPROVED.
OMB NO. 2040-0004.
Northwest Region Facsimile

ADDRESS: 138 Petrolia Street		(2-16)		(17-19)	
Karns City, Pa 16041		PA0002135		001	
		PERMIT NUMBER		DISCHARGE NUMBER	
MONITORING PERIOD					
FACILITY: WQ/IW/Tech		YEAR	MO	DAY	TO
LOCATION: Karns City Borough					
COUNTY: Butler County		(20-21)	(22-23)	(24-25)	(26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only)	QUANTITY OR LOADING			(4 Card Only)	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		(46--53)	(54-61)				(46-53)	(54-61)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Flow	Sample			MGD							continuous	recorded
	Measurement											
	Permit											
	Requirement	XX										
CBOD ₅ (05/01 - 10/31) (11/01 - 04/30)	Sample			lb/day lb/day				mg/l mg/l			weekly weekly	24-hr comp 24-hr comp
	Measurement											
	Permit	37	74			16	32					
	Requirement	74	148			32	64					
TSS	Sample			lb/day				mg/l			weekly	24-hr comp
	Measurement											
	Permit											
	Requirement	XX	XX			45	135					
Oil & Grease	Sample			lb/day				mg/l			weekly	3 grabs/24 hr
	Measurement											
	Permit											
	Requirement	XX				15						
Ammonia Nitrogen (05/01 - 10/31) (11/01 - 04/30)	Sample			lb/day lb/day				mg/l mg/l			weekly weekly	24-hr comp 24-hr comp
	Measurement											
	Permit	3	6			1.3	2.6					
	Requirement	9	18			3.9	7.8					
Dissolved Oxygen	Sample							mg/l			daily	grab
	Measurement											
	Permit											
	Requirement					5.0						
Aluminum	Sample			lb/day				mg/l			weekly	24-hr comp
	Measurement											
	Permit											
	Requirement	1.43	2.86			0.62	1.24					

NAME/TITLE PRINCIPAL EXECUTIVE
OFFICER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA
CODE NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

001

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample											
	Measurement											
	Permit											
	Requirement	XX	XX	lb/day		2	4	mg/l		weekly	24-hr comp	
Manganese	Sample											
	Measurement											
	Permit											
	Requirement	XX	XX	lb/day		1	2	mg/l		weekly	24-hr comp	
Copper	Sample											
	Measurement											
	Permit											
	Requirement	0.058	0.12	lb/day		0.025	0.063	mg/l		weekly	24-hr comp	
Lead	Sample											
	Measurement											
	Permit											
	Requirement	0.03	0.06	lb/day		0.013	0.026	mg/l		weekly	24-hr comp	
Zinc	Sample											
	Measurement											
	Permit											
	Requirement	XX	XX	lb/day		0.058	0.15	mg/l		weekly	24-hr comp	
Temperature January 1 - 31	Sample											
	Measurement											
	Permit											
	Requirement	Average Daily 63 MBTU/day								daily	immersion stab	
February 1 - 29	Sample											
	Measurement											
	Permit											
	Requirement	38 MBTU/day										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

001

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Temperature (continued) March 1 - 31	Sample Measurement											
	Permit Requirement	Average Daily 77 MBTU/day									daily	immersion stab
April 1 - 15	Sample Measurement											
	Permit Requirement	115 MBTU/day										
April 16 - 30	Sample Measurement											
	Permit Requirement	207 MBTU/day										
May 1 - 15	Sample Measurement											
	Permit Requirement	131 MBTU/day										
May 16 - 31	Sample Measurement											
	Permit Requirement	196 MBTU/day										
June 1 - 15	Sample Measurement											
	Permit Requirement	102 MBTU/day										
June 16 - 30	Sample Measurement											
	Permit Requirement	66 MBTU/day										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
TYPE OR PRINT								AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

001

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Temperature (continued) July 1 - 31	Sample Measurement											
	Permit Requirement	Average Daily 42 MBTU/day									daily	immersion stab
August 1 - 31	Sample Measurement											
	Permit Requirement	37 MBTU/day										
September 1 - 15	Sample Measurement											
	Permit Requirement	49 MBTU/day										
September 16 - 30	Sample Measurement											
	Permit Requirement	30 MBTU/day										
October 1 - 15	Sample Measurement											
	Permit Requirement	77 MBTU/day										
October 16 - 31	Sample Measurement											
	Permit Requirement	58 MBTU/day										
November 1 - 15	Sample Measurement											
	Permit Requirement	81 MBTU/day										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
TYPE OR PRINT								AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

001

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Temperature (continued) November 16 - 30	Sample											
	Measurement											
	Permit											
	Requirement	77 MBTU/day									daily	immersion stab
December 1 - 31	Sample											
	Measurement											
	Permit											
	Requirement	66 MBTU/day										
Fecal Coliform	Sample											
	Measurement											
	Permit											
	Requirement					200		/100ml		annual	grab	
Phenol	Sample											
	Measurement											
	Permit											
	Requirement	XX	XX	lb/day		0.012	0.021	mg/l		quarterly	grab	
pH	Sample											
	Measurement											
	Permit											
	Requirement				6.0		9.0	std. units		daily	grab	
	Sample											
	Measurement											
	Permit											
	Requirement											
	Sample											
	Measurement											
	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
TYPE OR PRINT								AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

002

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only (46--53))	QUANTITY OR LOADING (54-61)			(4 Card Only (38-45))	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	measured
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					15		mg/l		1/month	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

002

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		2/year	grab
Manganese	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		1/year	grab
Zinc	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		1/year	grab
pH	Sample											
	Measurement											
	Permit								std. units			
	Requirement						XX				1/year	grab
	Sample											
	Measurement											
	Permit											
	Requirement											
	Sample											
	Measurement											
	Permit											
	Requirement											
	Sample											
	Measurement											
	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	DATE MO DAY	
TYPE OR PRINT												

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

004

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

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(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/month	measured
TSS	Sample											
	Measurement											
	Permit											
	Requirement					30		mg/l		2/month	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					15		mg/l		2/month	grab	
Total Iron	Sample											
	Measurement											
	Permit											
	Requirement					1.4	2.8	mg/l		2/month	grab	
Manganese	Sample											
	Measurement											
	Permit											
	Requirement					1.0	2.0	mg/l		2/month	grab	
pH	Sample											
	Measurement											
	Permit											
	Requirement					6.0	9.0	std. units		2/month	grab	
	Sample											
	Measurement											
	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
TYPE OR PRINT								AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

005

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/month	estimate
CBOD ₅	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/month	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/month	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

005

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)			
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM								
Iron	Sample														
	Measurement														
	Permit														
	Requirement						XX		mg/l		2/month	grab			
Manganese	Sample														
	Measurement														
	Permit														
	Requirement						XX		mg/l		2/year	grab			
Copper	Sample														
	Measurement														
	Permit														
	Requirement						XX		mg/l		2/year	grab			
Zinc	Sample														
	Measurement														
	Permit														
	Requirement						XX		mg/l		2/year	grab			
pH	Sample														
	Measurement														
	Permit														
	Requirement						XX		std. units		2/year	grab			
	Sample														
	Measurement														
	Permit														
	Requirement														
	Sample														
	Measurement														
	Permit														
	Requirement														
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)											TELEPHONE		DATE	
TYPE OR PRINT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE		NUMBER		YEAR	MO	DAY			

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

006

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

006

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
	Sample											
	Measurement											
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	Permit											
	Requirement											
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

007

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

007

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
	Sample											
	Measurement											
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

008

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

008

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
	Sample											
	Measurement											
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

009

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

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(28-29)

(30-31)

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Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
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TSS	Sample											
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	Requirement					XX		mg/l		1/year	grab	
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

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Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

009

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

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(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
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	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

010

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only (46--53))	QUANTITY OR LOADING (54-61)			(4 Card Only (38-45))	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

010

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
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TYPE OR PRINT								AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

011

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

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NOTE: Read instructions before completing this form

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Flow	Sample											
	Measurement											
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	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
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	Requirement					XX		mg/l		2/year	grab	
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	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
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	Requirement					XX		mg/l		1/year	grab	
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	Requirement					XX		mg/l		1/year	grab	
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

011

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

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Iron	Sample								mg/l			
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	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
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	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

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(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

012

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

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DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

012

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

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YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

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Iron	Sample								mg/l			
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Facility Name / Location if different)

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ADDRESS: 138 Petrolia Street

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Karns City, Pa 16041

PERMIT NUMBER

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MONITORING PERIOD

FACILITY: WQ/IW/Tech

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LOCATION: Karns City Borough

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Karns City, Pa 16041

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FACILITY: WQ/IW/Tech

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ADDRESS: 138 Petrolia Street

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Karns City, Pa 16041

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FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

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TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

014

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
	Sample											
	Measurement											
	Permit											
	Requirement											
	Sample											
	Measurement											
	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

023

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					15		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

DISCHARGE MONITORING REPORT (DMR)

DISCHARGE NUMBER

(30-31)

Northwest Region Facsimile

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)		(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
Iron	Sample							mg/l			
	Measurement										
	Permit										
	Requirement					XX				2/year	grab
Manganese	Sample							mg/l			
	Measurement										
	Permit										
	Requirement					XX				2/year	grab
Copper	Sample							mg/l			
	Measurement										
	Permit										
	Requirement					XX				1/year	grab
Zinc	Sample							mg/l			
	Measurement										
	Permit										
	Requirement					XX				1/year	grab
pH	Sample							mg/l			
	Measurement										
	Permit										
	Requirement					XX				1/year	grab
	Sample										
	Measurement										
	Permit										
	Requirement										
	Sample										
	Measurement										
	Permit										
	Requirement										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	TELEPHONE NUMBER	YEAR	DATE MO DAY
TYPE OR PRINT											

TYPE CRIMINAL	years)
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

031

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

031

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
	Sample											
	Measurement											
	Permit											
	Requirement											
	Sample											
	Measurement											
	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

032

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

032

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
	Sample											
	Measurement											
	Permit											
	Requirement											
	Sample											
	Measurement											
	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

033

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

033

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		2/year	grab
Manganese	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		1/year	grab
Copper	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		1/year	grab
Zinc	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		1/year	grab
pH	Sample											
	Measurement											
	Permit											
	Requirement						XX		mg/l		1/year	grab
	Sample											
	Measurement											
	Permit											
	Requirement											
	Sample											
	Measurement											
	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
TYPE OR PRINT								AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

034

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Oil and Grease	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		1/year	grab	
Aluminum	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

034

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
Manganese	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Copper	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					1/year	grab
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	Permit											
	Requirement											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

020

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

(26-27)

(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Flow	Sample											
	Measurement											
	Permit											
	Requirement	XX			MGD						2/year	estimate
TSS	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
TOC	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
Ammonia as Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
Nitrate-Nitrite Nitrogen	Sample											
	Measurement											
	Permit											
	Requirement					XX		mg/l		2/year	grab	
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	Requirement					XX		mg/l		2/year	grab	
Aluminum	Sample											
	Measurement											
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may includes fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

020

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

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(28-29)

(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only (46--53))	QUANTITY OR LOADING (54-61)			(4 Card Only (38-45))	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
Iron	Sample								mg/l			
	Measurement											
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	Requirement					XX					2/year	grab
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	Measurement											
	Permit											
	Requirement					XX					2/year	grab
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	Permit											
	Requirement					XX					2/year	grab
Zinc	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
pH	Sample								mg/l			
	Measurement											
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NOTE: YOUR PERMIT WILL EXPIRE ON _____; PLEASE SUBMIT YOUR RENEWAL APPLICATION BEFORE _____.

PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

022

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

(24-25)

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(30-31)

NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
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Flow	Sample											
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

XX -- Monitor and report on monthly DMRs.

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PERMITTEE NAME ADDRESS (include

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Facility Name / Location if different)

DISCHARGE MONITORING REPORT (DMR)

NAME: Penreco

(2-16)

(17-19)

ADDRESS: 138 Petrolia Street

PA0002135

022

Karns City, Pa 16041

PERMIT NUMBER

DISCHARGE NUMBER

FORM APPROVED.

OMB NO. 2040-0004.

Northwest Region Facsimile

MONITORING PERIOD

FACILITY: WQ/IW/Tech

YEAR

MO

DAY

TO

YEAR

MO

DAY

LOCATION: Karns City Borough

COUNTY: Butler County

(20-21)

(22-23)

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NOTE: Read instructions before completing this form

Parameter (32-37)		(3 Card Only) (46--53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
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	Requirement					XX					2/year	grab
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	Measurement											
	Permit											
	Requirement					XX					2/year	grab
pH	Sample								mg/l			
	Measurement											
	Permit											
	Requirement					XX					2/year	grab
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